

INSPECTIONS AND APPEALS DEPARTMENT[481]

Adopted and Filed

Rule making related to physician assistants

The Inspections and Appeals Department hereby amends Chapter 57, “Residential Care Facilities,” Chapter 65, “Intermediate Care Facilities for Persons with Mental Illness (ICF/PMI),” and Chapter 71, “Subacute Mental Health Care Facilities,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 10A.104.

State or Federal Law Implemented

This rule making implements, in whole or in part, 2022 Iowa Acts, House File 803.

Purpose and Summary

These amendments update rules in accordance with changes included in 2022 Iowa Acts, House File 803. This legislation required agencies that adopt rules pursuant to Iowa Code chapter 17A providing a power, privilege, right, or duty to a physician licensed under Chapter 148 to also provide the same power, privilege, right, or duty to a physician assistant licensed under Chapter 148C, to be consistent with the scope of practice of the physician assistant as specified therein.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 25, 2023, as ARC 6834C. No public comments were received. No changes from the Notice have been made.

Adoption of Rule Making

This rule making was reviewed and approved by the State Board of Health at its March 8, 2023, meeting. This rule making was adopted by the Department on March 15, 2023.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to 481—Chapter 6.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on May 10, 2023.

The following rule-making actions are adopted:

ITEM 1. Amend paragraph **57.6(2)“a”** as follows:

a. Definition. For purposes of this rule, the following term shall have the meaning indicated.

“Qualified intellectual disability professional” means a psychologist, physician, physician assistant, registered nurse, educator, social worker, physical or occupational therapist, speech therapist or audiologist who meets the educational requirements for the profession, as required in the state of Iowa, and has one year’s experience working with persons with an intellectual disability.

ITEM 2. Amend rule **481—65.1(135C)**, definition of “Qualified mental health professional (QMHP),” as follows:

“Qualified mental health professional (QMHP)” means a person who:

1. Holds at least a master’s degree in a mental health field, including but not limited to: psychology, counseling and guidance, nursing and social work; or is a doctor of medicine (M.D.) or a doctor of osteopathic medicine and surgery (D.O.) or a physician assistant; and
2. Holds a current Iowa license when required by the Iowa licensure law; and
3. Has at least two years of postdegree experience, supervised by a mental health professional, in assessing mental problems and needs of individuals and in providing appropriate mental health services for those individuals. See rule 481—65.4(135C) for ~~variance~~ waiver procedures.

ITEM 3. Amend subparagraph **71.8(3)“a”(3)** as follows:

(3) Requires consultation with the attending physician, ~~or~~ designee of the physician, physician assistant, or advanced registered nurse practitioner who determines, in writing, on a form designated by the department, that an injury is a “major injury” based upon the circumstances of the accident, the previous functional ability of the resident, and the resident’s prognosis;

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EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 4/5/23.